

Additional Company Notes - For Comprehensive Policies

American Family Life Assurance Company

Form#:A-27000-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for American Family Life Assurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes Provided

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: Available only for \$100/day, \$120/day, \$150/day, or \$200/day

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Bankers Life and Casualty Company

Form#:GR-N350

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Bankers Life and Casualty Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 2920 days is equivalent to 8 years.

Elimination Period Notes: 15 day and 180 day options also available

Nursing Home Daily Benefit Notes: When the 50% HHC option is selected, the minimum Nursing Home Benefit Amount must be at least \$100.

Inflation Protection Notes: Also available are 3% and 4% compound inflation options

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Bankers Life and Casualty Company

Form#:GR-N380

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Bankers Life and Casualty Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 2920 days are equivalent to 8 years.

Elimination Period Notes: 15 day and 180 day options are also available

Nursing Home Daily Benefit Notes: When the 50% HHC option is selected, the minimum Nursing Home Benefit Amount must be at least \$100.

Inflation Protection Notes: 3% and 4% compound inflation options.

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

BC Life & Health Insurance Company

Form#:PFTQ-03-0102

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for BC Life & Health Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes Provided

Elimination Period Notes: 180 day elimination period.

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

BC Life & Health Insurance Company

Form#:PFTQ-02-0102

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for BC Life & Health Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180 Day elimination period

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Berkshire Life Insurance Company of America

Form#:BGO1P(06/04)CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Berkshire Life Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

***Elimination Period Notes: Additional periods include:
180 days***

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

Combined Insurance Company of America	Form#:14785-CA
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Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Combined Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180 Days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Continental Casualty Company	Form#:GLTC-3-P-CA-01-TQ
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Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for Continental Casualty Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 1500x, 2000x, 3000x, 3650x, 4000x, 5000x - see company for more details.

Elimination Period Notes: Also available are: 120C, 180C, 180/180S, 120/120S, 90/15S, 60/15S, 30/15S (where NF/HC service days)

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: 66 and 2/3rds% also available

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

CUNA Mutual Life Insurance Company

Form#:2002-LTC-COMP(CA)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for CUNA Mutual Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180 day also available

Nursing Home Daily Benefit Notes: No Company
Notes Provided

***Inflation Protection Notes: 5% Lifetime, 5% 15 year and
3% Lifetime Compound***

***Home Care Benefit Notes: 125%, 150% and
200%. Percentages available vary depending
on Nursing Facility Daily Benefit amount
selected.***

Residential Care Daily Benefit Notes: No Company Notes
Provided

Genworth Life Insurance Company

Form#:7035AX Rev

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Genworth Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

***Elimination Period Notes: The Elimination Period only
applies to the Nursing and Residential Care Facilities.
Home Care Benefits are not subject to an Elimination
Period.***

Nursing Home Daily Benefit Notes: No Company
Notes Provided

***Inflation Protection Notes: The Simple Benefit
Increases Option will increase the original daily
maximum and lifetime maximum by 5% each year. The
Compound Benefit Increases Option will increase the
previous year's daily maximum and lifetime maximum
by 5% each year and will not be reduced by prior
payments.***

***Home Care Benefit Notes: Home Care Benefits
are subject to a Monthly Maximum equal to 31
times the Daily Payment Maximum***

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

Great American Life Insurance Company

Form#:1LTCIP0001 (CA)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Great American Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes Provided

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: Cost of Living Increase Rider

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

John Hancock Life Insurance Company

Form#:LTC-06 CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for John Hancock Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

***Maximum Policy Benefit Notes:
365,730,1095,1460,1825,2190,3650 (No. of days)
times the Nursing Home Daily Benefit &
Lifetime. A 10 year maximum benefit period
also offered.***

***Elimination Period Notes: 180, 365 and 730 day EP
also offered.***

***Nursing Home Daily Benefit Notes: Maximum
Daily Benefit of \$250 for ages 80-84***

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

***Residential Care Daily Benefit Notes: 70% applies to
HHC also***

Additional Company Notes - For Comprehensive Policies

Life Investors Insurance Company of America

Form#:LI 1-FP (CA) 1001

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Life Investors Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 750, 1125, 1500, 1875, 2250 days (times the Nursing Facility Daily Benefit) and Unlimited.

Elimination Period Notes: 180 Days

Nursing Home Daily Benefit Notes: \$50 - \$300 per day in \$10 increments

Inflation Protection Notes: Step-Rated and 2X Max Comp Infl. available. Deferred Benefit Increase - can add Simple, Std Comp or 2x Max on 1st, 3rd or 5th anniv at current age w/o u/w.

Home Care Benefit Notes: 50% - 100% available

Residential Care Daily Benefit Notes: 70% - 100% available

Massachusetts Mutual Life Insurance Company

Form#:MM-400-P-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Massachusetts Mutual Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 10 year plan is also available.

Elimination Period Notes: Additional Period: 180 days

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

MedAmerica Insurance Company

Form#:GRP11-341-MA-CA-601

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for MedAmerica Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180 days and 365 days are also available

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: Compound inflation option - benefit amounts are increased by 5% of the previous year's benefit amount each renewal year for as long as the certificate is in force.

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

MedAmerica Insurance Company

Form#:NGR11-341-MA-CA-601

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for MedAmerica Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180 days and 365 days are also available

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: Compound inflation option - benefit amounts are increased by 5% of the previous year's benefit amount each renewal year for as long as the certificate is in force.

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

Metropolitan Life Insurance Company

Form#:LTC2-VAL-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Metropolitan Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 730, 1095,
1460, 1825, 2555 (No. of days) times the
Nursing Facility Daily Benefit.

Elimination Period Notes: 45 Service Days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: 50%

Metropolitan Life Insurance Company

Form#:LTC2-PREM-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Metropolitan Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 730, 1095,
1460, 1825, 2555 (No. of days) times the
Nursing Facility Daily Benefit.

Elimination Period Notes: 45 Calendar Days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: 50%

Additional Company Notes - For Comprehensive Policies

Metropolitan Life Insurance Company

Form#:GPNP99-LTC-CA01/GC.LTC899C-CA01-S

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for Metropolitan Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 1095, 1460, 1825, 2190, 2555 (No. of days) times the Nursing Facility Daily Benefit. 10 Yrs. also available.

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: These services are reimbursed up to 100% of the daily benefit

Inflation Protection Notes: This increase in coverage may be purchased without a health screen, as long as the insured has selected it once in every 2 offerings. This is offered to insureds regardless of age, claim status, claim history, or length of participation in the plan.

Home Care Benefit Notes: Minimum \$50 per day

Residential Care Daily Benefit Notes: Minimum \$50 per day

Metropolitan Life Insurance Company

Form#:GPNP99-LTC-CA01/GC.LTC899C-CA01-C

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for Metropolitan Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 1095, 1460, 1825, 2190, 2555 (No. of days) times the Nursing Facility Daily Benefit. 10 Yrs. also available.

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: These services are reimbursed up to 100% of the daily benefit

Inflation Protection Notes: This increase in coverage may be purchased without a health screen, as long as the insured has selected it once in every 2 offerings. This is offered to insureds regardless of age, claim status, claim history, or length of participation in the plan.

Home Care Benefit Notes: Minimum \$50 per day

Residential Care Daily Benefit Notes: Minimum \$50 per day

Additional Company Notes - For Comprehensive Policies

Metropolitan Life Insurance Company

Form#:LTC2-IDEAL-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Metropolitan Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 730, 1095, 1460, 1825, 2555 (No. of days) times the Nursing Facility Daily Benefit.

Elimination Period Notes: 45 Service Days

Nursing Home Daily Benefit Notes: Monthly Benefit = 30xDaily Benefit Allowance. \$100 minimum to \$400 maximum per day with a \$10 increment, with 50% Home Care Benefit Amount

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: 50%

Monumental Life Insurance Company

Form#:MLC 1-FP (CA)1001

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Monumental Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: *750, 1000, 1250, 1500, 1750, 2000, 2500 days and Unlimited

Elimination Period Notes: Also 150 and 180. Elimination Period applies to facilities only. Zero Elimination Period for Home and Community Care.

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: 3% Simple, 3% Compound, 3% Compound 2 times max, 5% Compound 2 times max, and 5% Step Rated.

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Mutual of Omaha Insurance Company

Form#:LCA-20320

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Mutual of Omaha Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: Also 180 days and 365 days. 0-day and 20-day not available to ages 80 and over.

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Mutual of Omaha Insurance Company

Form#:LCAQ-20321

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Mutual of Omaha Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: Also 180 days and 365 days. 0-day and 20-day not available to ages 80 and over.

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

New York Life Insurance Company

Form#:ILTC-5000(CA)(1001)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for New York Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 730, 1095, 1460, 1825, 2555 or 3650 (No. of days) times the Nursing Facility Daily Benefit. 10 Yrs. Plan is also available

Elimination Period Notes: 180 Days and 365 Days are also available

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: There are 7 automatic annual inflation protection options: Simple 1%, Simple 2%, Simple 3%, Simple 4%, Simple 5%, Simple 6% and Compound 5%. There are 3 Guaranteed Purchase Options: CPI-U, CPI-U + 1 and CPI-U +2. With the CPI-U Guaranteed Purchase option, the policyowner receives annual offers to increase his benefits

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Northwestern Long Term Care Insurance Company

Form#:RS.LTC.(1101)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Northwestern Long Term Care Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: 1,095 days, 2,190 days times the Nursing Facility Benefit Amount or Lifetime.

Elimination Period Notes: Also available: 45 Days, 180 Days

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: Also available: 3% compound, 4% compound

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Penn Treaty Network America Life Insurance Company

Form#:PF3-P(CA)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Penn Treaty Network America Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: We also offer 8,9 and 10 years.

Elimination Period Notes: We also offer 120, 150, 180, 365, 730, 1095 and 1460.

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: Increases the Nursing Facility and Residential Care Facility Daily Benefit and the Home and Community Care Daily Benefit by 5% (compounded annually) on the rider anniversary date.

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Penn Treaty Network America Life Insurance Company

Form#:PF3-TQ-P(CA)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Penn Treaty Network America Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: We also offer 8,9 and 10 years.

Elimination Period Notes: We also offer 120, 150, 180, 365, 730, 1095 and 1460.

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: Increases the Nursing Facility and Residential Care Facility Daily Benefit and the Home and Community Care Daily Benefit by 5% (compounded annually) on the rider anniversary date.

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Pennsylvania Life Insurance Company

Form#:P34 CA (Rev 1/02)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Pennsylvania Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: *The max \$300 daily benefit is used. Maximum benefit period will be higher for lower daily benefits.*

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Pennsylvania Life Insurance Company

Form#:P30 CA (Rev 1/02)

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Pennsylvania Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: *Max Benefit Period includes 3,333 days times the Nursing Facility Daily Benefit (or 9.13 years) or Lifetime; The max \$300 daily benefit is used. Maximum benefit period will be higher for lower daily benefits.*

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Physicians Mutual Insurance Company

Form#:P146CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Physicians Mutual Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: *Our Facility Care Benefit is monthly so it is 12 times the Facility Care benefit times the Benefit Period selected. Also, we offer 8 Yrs..*

Elimination Period Notes: *Also offer a 180 days or 365 days elimination period options.*

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: *Also offer 5% compound capped at 2 x monthly benefit originally selected.*

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Physicians Mutual Insurance Company

Form#:P145CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Physicians Mutual Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: *Our Facility Care Benefit is monthly so it is 12 times the Facility Care benefit times the Benefit Period selected. Also, we offer 8 Yrs..*

Elimination Period Notes: *Also offer a 180 days or 365 days elimination period options.*

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: *Also offer 5% compound capped at 2 x monthly benefit originally selected.*

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

State Farm Mutual Automobile Insurance Company

Form#:97058CA.1

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for State Farm Mutual Automobile Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: Max Benefit
Period includes 3650 days times the Daily
Benefit or 10 Years

Elimination Period Notes: 180 Days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

The Prudential Insurance Company of America

Form#:83500 BFW 5005

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for The Prudential Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefit Notes: Also 10 years.

Elimination Period Notes: Also 180 and 365 days.

Nursing Home Daily Benefit Notes: No Company
Notes Provided

Inflation Protection Notes: 5% Compound: Same as
previous except DMB and LMB are increased by 5%
compound interest before claims are subtracted.
Periodic Offer must be made every 3 yrs.

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Additional Company Notes - For Comprehensive Policies

The State Life Insurance Company

Form#:S-6000-P-3-CA

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for The State Life Insurance Company. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes Provided

Elimination Period: No Company Notes Provided

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: No Company Notes Provided

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Unum Life Insurance Company of America

Form#:TQGLTC95 ER COMP

Additional Company Notes (GENERAL):

These notes apply to the Group Comprehensive LTC Policy Forms for Unum Life Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes Provided

Elimination Period Notes: 180 and 365 days

Nursing Home Daily Benefit Notes: No Company Notes Provided

Inflation Protection Notes: Also 5% Compound and Simple capped at 200% of the original monthly benefit amount.

Home Care Benefit Notes: No Company Notes Provided

Residential Care Daily Benefit Notes: No Company Notes Provided

Additional Company Notes - For Comprehensive Policies

Unum Life Insurance Company of America

Form#:LTC99TQ3

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Unum Life Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180, 365 and 730 days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

***Inflation Protection Notes: Also 5% Compound and
Simple capped at 200% of the original monthly benefit
amount.***

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided

Unum Life Insurance Company of America

Form#:LTC99PQ3

Additional Company Notes (GENERAL):

These notes apply to the Individual Comprehensive LTC Policy Forms for Unum Life Insurance Company of America. For more details and/or a complete explanation, contact the company.

Notes for Company's COMPREHENSIVE POLICY COMPARISON FORM:

Maximum Policy Benefits: No Company Notes
Provided

Elimination Period Notes: 180, 365 and 730 days

Nursing Home Daily Benefit Notes: No Company
Notes Provided

***Inflation Protection Notes: Also 5% Compound and
Simple capped at 200% of the original monthly benefit
amount.***

Home Care Benefit Notes: No Company Notes
Provided

Residential Care Daily Benefit Notes: No Company Notes
Provided